

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011238

FILED
Apr 05, 2012
Secretary of State

Entity Name: HEALTH ORIENTATION ACTIVITY FOUNDATION CORP.

Current Principal Place of Business:

3095 NW 7 ST
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

3095 NW 7 ST
MIAMI, FL 33125 US

New Mailing Address:

FEI Number: 45-1967052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEESING& ASSOCIATES, INC
9153 SW 206TH STREET
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: NGUYEN, HOA
Address: 1330 NE 162 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: D
Name: BRAMI, HANNA
Address: 4300 SHERIDAN ST. APT 222
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: D
Name: LOPEZ, ARMANDO E
Address: 3095 NW 7 ST
City-St-Zip: MIAMI, FL 33125 US

Title: TD
Name: CHIN SANG, KEITHSON
Address: 9153 SW 206 ST
City-St-Zip: MIAMI, FL 33189 US

Title: S
Name: HASBUN, CLAUDIA
Address: 780 W 71 PLACE
City-St-Zip: HIALEAH, FL 33014 US

Title: D
Name: MOTCHALOVA, JULIA
Address: 2336 NE 172 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOA NGUYEN

PD

04/05/2012

Electronic Signature of Signing Officer or Director

Date